



ALL BLANK LINES MUST BE FILLED IN

LYME ART ASSOCIATION

Title (please print)

*Passion in Spring*

Artist (please print)

*Lydia Longacre*

Address

*27 West 67th St.*

The Association shall not be responsible for loss or damage, no matter how the same may be caused, the responsibility therefore resting solely with the owner, and this exhibit is submitted and accepted subject to this condition, which is hereby accepted.

Signature of Artist

*W. F. S.*

or Owner

*Lydia Longacre*

ATTACH THIS END TO BACK OF PICTURE